

CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION
FOR CONNECTICUT

Request for Amendment – Raised Bill 6305

The Christian Science Committee on Publication for Connecticut respectfully requests that the following amendment included in Raised Bill 6305:

Add a new subsection (c)(15) to Section 11 (page 39) of the bill that reads:

(c) In furtherance of the objectives set forth in subsection (a) of this section, the SustiNet Plan Authority shall: . . .

(15) ensure that quality measurement for nonmedical and alternative services is as stringent as that used for medical services but also consistent with the patient's desire to utilize a nonmedical form of treatment and is based on nationally-recognized standards and measures, if available.

EXPLANATION

This amendment makes explicit that implementation of the SustiNet Plan by the SustiNet Authority will include implementation of the SustiNet Quality and Provider Advisory Committee's recommendation regarding nonmedical providers. It will ensure that insurance plans offered through SustiNet will have the flexibility to cover these services so that patients can have access to high quality, effective, nonmedical care.

Nonmedical services include religious nonmedical care provided by Christian Science practitioners and Christian Science nurses. Christian Science practitioners are individuals who have demonstrated the ability to heal others through prayer, and who make themselves available to the public on a 24-hour basis. Christian Science nurses provide spiritual support and skillful physical care to patients who have elected to rely on prayer for healing.¹ Connecticut citizens have been utilizing this form of care for over a century, and have been finding that it leads to quick, effective healing and improved health outcomes.

This amendment ensures that quality measures applied to nonmedical providers will be consistent with patient choice. Christian Science practitioners and Christian Science nurses comply with nonmedical eligibility, quality assurance, and cost-containment criteria that ensure that funds are spent appropriately and patients are safe. However, the application of medical criteria (for example, a requirement that a patient receive a medical diagnosis or receive all care through a "medical home") can limit patient access to the services of Christian Science practitioners and Christian Science nurses. This is because patients who choose these services have chosen a form of care that, by definition, does not involve medical diagnosis, prognosis, or treatment. The proposed amendment accommodates these patients' desire to rely on a nonmedical approach to healing while allowing for the application of nonmedical safeguards that promote efficient service delivery and quality care. **Exhibit A** contains examples of existing laws from other jurisdictions that afford this type of accommodation for nonmedical services.

¹ Christian Science practitioners and Christian Science nurses are not compensated by the Christian Science church. They are compensated by those who request their help, and sometimes by private and governmental health

Exhibit A
Examples of Statutes That Accommodate
Spiritual Care Services from Medical Criteria

MASSACHUSETTS

Massachusetts General Laws Annotated
Part I. Administration of the Government (Ch. 1-182)
Title XXII. Corporations (Ch. 155-182)
Chapter 176O. Health Insurance Consumer Protections

§ 11. Rights of health benefit plans to include as providers religious non-medical providers

“Nothing in this chapter shall be construed to restrict or limit the rights of health benefit plans to include as providers religious non-medical providers, require such health benefit plans to utilize medically based eligibility standards or criteria in deciding provider status for religious non-medical providers, use medical professionals or criteria to decide insured access to religious non-medical providers, utilize medical professionals or criteria in making decisions in internal appeals from decisions denying or limiting coverage or care by religious non-medical providers, compel an insured to undergo a medical examination or test as a condition of receiving coverage for treatment by a religious non-medical provider, or require such health benefit plans to exclude religious non-medical providers because they do not provide medical or other data otherwise required, if such data is inconsistent with the religious non-medical treatment or nursing care provided by the provider.”

(Cite as: Mass. Gen. Laws Ann. 176O, § 11 (2010))

Massachusetts General Laws Annotated
Part I. Administration of the Government (Ch. 1-182)
Title XXII. Corporations (Ch. 155-182)
Chapter 176O. Health Insurance Consumer Protections

§ 1. Definitions

“As used in this chapter, the following words shall have the following meanings:--

. . . "Religious non-medical provider", a provider who provides no medical care but who provides only religious non-medical treatment or religious non-medical nursing care.”

(Cite as: Mass. Gen. Laws Ann. 176O, § 1 (2010))

OTHER EXAMPLES

MAINE

- Me. Rev. Stat. Ann., tit. 24-A, § 4307 (2010)).
- Me. Rev. Stat. Ann., tit. 24-A, § 4301-A(17) (2010)).

ALASKA

- Alaska Stat. § 21.07.080 (2010))
- Alaska Stat. § 21.07.250(17) (2010))

WASHINGTON

- Wash. Rev. Code Ann. § 48.43.520 (2010)).
- Wash Rev Code Ann 48.43.540 (2010))